3id No. 2022-042 Water Quality Testing and Reporting FY23-FY25				6/16/2022	
Town of Westerly, RI 02891				2:00 P.M.	
			Vendors		
		Phoenix Envi	ronmental Lal	ooratories I	
Item #	Description	FY23	FY24	FY25	
	Total Coliform Rule: Forty-four (44) Samples				
1	per month which includes Escherichia Coli, Total				
	Coliform, Color, Odor, Turbidity, Chlorine Residual,	\$4,490.00	\$4,715.00	\$4,950.0	
	and PH, as per requirements Under scope of services.	' /			
	Cost per month for above.				
	Raw water Coliform Sampling of 12 Active	1			
2	Wells, once per month as required	\$335.00	\$365.00	\$400.0	
	*Cost per month for above, if needed	\$333.00	\$303.00	5400.0	
		1			
3	Regulated Volatile Organic Compounds-as required for				
	active wells as per regulations and scheduling of Dept	\$75.00	\$78.00	\$80.0	
	of Health				
	*Unit Cost for each test				
4	Regulated Synthetic Organic Compounds-as required				
	for active wells as per regulations and scheduling of	\$695.00	\$725.00	\$795.0	
	Dept of Health	\$093.00	\$723.00	\$755.0	
	*Unit cost for each test				
	Nitrate-as required for active wells as per scheduling				
5	of Dept of Health	\$13.00	\$15.00	\$16.0	
	*Unit cost for each test	\$15.00	\$15.00	ψ 1 0.0	
	Sodium as required for active wells as per scheduling				
6		¢16.00	ć10.00	ć10 O	
	of Dept of Health	\$16.00	\$18.00	\$18.0	
	*Unit cost for each test				
7	Regulated inorganic contaminants for active wells as				
	per scheduling of Dept of Health	\$175.00	\$185.00	\$195.0	
	*Unit cost for each well				
8a	Lead and copper sampling-for pickup, testing and				
	reporting as needed.	\$10.00	\$11.00	\$12.0	
	*Unit cost for lead test				
8b	*Unit cost for copper test	\$10.00	\$11.00	\$12.0	
	Regulated fluoride test-for active wells as per				
9	scheduling of Dept of Health	\$16.00	\$17.00	\$18.0	
-	*Unit cost for each test				
10	Gross Alpha	\$60.00	\$65.00	\$65.0	
11	Gross Beta	\$60.00	\$65.00	\$65.0	
12					
	Radium 226	\$75.00	\$80.00	\$80.0	
13	Radium 228	\$75.00	\$80.00	\$80.0	
14	Uranium 200.7	\$30.00	\$30.00	\$35.0	
15	Total haloacetic acids (HAAS)	\$95.00	\$100.00	\$105.0	
16	Total trihalomethane analysis (TTHM)	\$70.00	\$75.00	\$80.0	
17	Additional coliform and physicals	\$65.00	\$65.00	\$65.0	
18	Coliform only - additional	\$22.00	\$24.00	\$26.0	
19	Raw water coliform - additional	\$25.00	\$27.00	\$29.0	
20	H.P.C.	\$25.00	\$27.00	\$29.0	
			·		
Bid Bond Submitt	ted		N/A		
Exclusions		none			
		no			
Experience Mod Rating Submitted		yes			
Addendum Submitted (if applicable)		-			
Contractor's Experience Submitted		N/A			
Subcontractor's L			N/A		
Bidder Certification	on Submitted		yes		
Vendor Name		Phoenix Envi	ronmental Lal	oratories I	
/endor Address		East Middle Turnpike, Manchester, CT			
Vendor Contract		Bobbi Aloisa			
Telephone		(860) 645-1102			
Email Address	+	,	@phoenixlab		